

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

For Official Use Only

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

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1. File Number U -	2. Fiscal Year Covered From: 1 / 1 / 04 Through: 12 / 31 / 04
3. Name and address of person filing. Name <u>ROBERT F. SCHNEIDER</u> P.O. Box, Bldg., Room No., if any Street <u>4550 ROOSEVELT ROAD</u> City <u>HILLSDALE</u> State <u>ILLINOIS</u> ZIP Code + 4 <u>60162</u>	4. Name, file number, and address of labor organization Name <u>Sheet Metal Workers Local 73</u> Labor Organization File Number <u>036-283</u> P.O. Box, Building and Room Number, if any Street <u>4550 ROOSEVELT ROAD</u> City <u>HILLSDALE</u> State <u>ILLINOIS</u> ZIP Code + 4 <u>60162</u>
5. Position in labor organization. <u>RECORDING SECRETARY</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income 7.b. Amount.

Signature

15. **Signature and verification.** The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed Robert F. Schneider

On 7/14/05
Date

708-449-0073
Telephone Number

DISCLAIMER

The transactions, dealing and interests that are detailed in the attached Form LM-30 represent my good faith effort to reconstruct the reportable occurrences for the period of January 1, 2004 to December 31, 2004. Accurate records of reportable occurrences were not kept for the 2004 fiscal year and some or many items may have been unintentionally omitted.

Robert F. Schneider
Signature

7/14/05
Date